

ELLIS ISLAND, CONTAGIOUS DISEASE HOSPITAL MORTUARY
(Ellis Island, Animal House)
(U.S. Immigration Station)
Statue of Liberty National Monument
New York Harbor
New York
New York County
New York

HABS NY-6086-N
NY-6086-N

PHOTOGRAPHS

WRITTEN HISTORICAL AND DESCRIPTIVE DATA

REDUCED COPIES OF MEASURED DRAWINGS

FIELD RECORDS

HISTORIC AMERICAN BUILDINGS SURVEY
National Park Service
U.S. Department of the Interior
1849 C Street NW
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HISTORIC AMERICAN BUILDINGS SURVEY

ELLIS ISLAND, CONTAGIOUS DISEASE HOSPITAL MORTUARY (Ellis Island, Contagious Disease Hospital Animal House)

HABS No. NY-6086-N

Location: New York Harbor, Jersey City, Hudson County, New Jersey, and New York City, New York County, New York

Present Owner: U.S. Department of the Interior, National Park Service

Present Occupant: Ellis Island National Monument

Present Use: Vacant

Significance: Ellis Island is significant as the primary port of entry into the United States for immigrants during the period 1892-1954. It is located in New York Harbor on three small islands modified by successive building programs into one. Opened in 1892, the first immigration station was destroyed by fire in 1897 and the facility subsequently rebuilt over time with immigrant processing buildings on Island 1, a hospital complex on Island 2 and a contagious disease hospital on Island 3. The Mortuary is part of the contagious disease hospital complex and served important ancillary uses as a morgue and as housing for small laboratory animals. The hospital complex at Ellis Island—operated by the U.S. Marine Hospital Service from 1900 to 1912 and by the U.S. Public Health Service from 1912 to 1951—closed March 1, 1951. The Ellis Island Immigration Station ceased operation November 12, 1954. The complex was made part of the Statue of Liberty National Monument in 1965.

The Mortuary is a diminutive but important support structure for the Contagious Disease Hospital was constructed in 1907. It is integrated with its neighboring structures by a consistent use of materials and Georgian Revival decorative details. The Mortuary appears to have been the only building at Ellis Island specifically designed for that use and is a unique building type within the facility's development. This one-room structure was converted to the "Animal House" around 1919 to shelter small laboratory animals used in medical testing. This use seems to have continued until the hospital closed on March 1, 1951. Thereafter, the U.S. Coast Guard used buildings on Island 3 for file storage, with other buildings, possibly including the Mortuary, left vacant.

I. HISTORICAL INFORMATION

A. Physical History:

1. Date of erection: 1907
2. Architect: Office of the Supervising Architect, U.S. Department of the Treasury (James Knox Taylor, Supervising Architect)
3. Original owner: U.S. Department of Commerce and Labor, 1907-1912
Subsequent Owners: U.S. Department of Labor 1913-1940, Immigration Service
U.S. Department of Justice, Immigration and Naturalization Service, 1942-1954
U.S. General Services Administration, 1954-1965
U. S. Department of the Interior, National Park Service, 1965-present
4. Builder: North-Eastern Construction Co., New York
5. Original plans and construction: Historic plans, specifications, and field observation indicate that the Mortuary largely retains its historic appearance. In 1906, the Office of the Supervising Architect prepared plans for the Mortuary. This single sheet includes elevations, plans, a section, and details.¹ (Figures 1-3) According to the original specifications, the interior was to be finished with plaster walls with a coved plaster ceiling, cement flooring with a coved cement base, slate slab shelving mounted on the east and west walls and a sink on the north wall.²
6. Alterations and additions: The original slate slab shelving on the east and west interior walls was removed at an unknown date. These shelves were probably used for cadaver storage. The change from a mortuary to a laboratory animal shelter by the 1920s appears to have had little impact on the building form and fabric. During the 1920s and 1930s various roof repairs, painting, and electrical upgrades were made to all buildings on Island 2 and Island 3. A 1934 "Layout of Ellis Island" shows the building's footprint unchanged from the original.³

A. Historical Context:

¹ Original drawings for Ellis Island buildings are digitized and available from the Technical Information Center (TIC), Denver Service Center, National Park Service, U.S. Department of the Interior, <http://etic.nps.gov>.

² Proposals for the Construction Complete (Except Heating, Elevator, Electric Conduits and Wiring) of the Contagious Disease Hospital, U.S. Immigrant Station, Ellis Island, NY, Folder 51436/1-8A, New Contagious Disease Hospital at Ellis Island (1905-1907), Pt. 1 and Pt. 2, Boxes 33 and 34, Entry 9 - Subject and Policy Files, 1893-1957, Record Group 85 - Records of the Immigration and Naturalization Service, National Archives and Records Administration, Washington, D.C. (hereafter Entry 9, RG 85, NARA I); and Specifications for Measles Wards C, D, F, G and H, Isolation Wards I, K, and L, Staff House, Office Building and Mortuary (1907), Folder 51436/1-8C, Pt. 1, Box 34, Entry 9, RG 85, NARA I.

³ U.S. Department of Labor, *Report of the Ellis Island Committee* (New York: Ellis Island Committee, March 1934).

The United States Immigration Station at Ellis Island, New York, was established in April 1890 and was an early, and perhaps the most well known example of the federal immigration facilities established during the late nineteenth century. Prior to 1890, the states handled immigration, but the growing influx of immigrants nationwide spurred federal officials to establish a new federal system, including an isolated facility on Ellis Island in New York Harbor.⁴ To accommodate the new facility, Ellis Island was enlarged to eleven acres and improved with a number of wooden buildings.⁵ The immigration station opened January 1, 1892, and processed more than 1,500,000 immigrants until a fire on July 15, 1897 destroyed it.⁶

Planning for a new facility was quickly undertaken by the U.S. Department of the Treasury, the agency then responsible for immigration.⁷ The new immigration station at Ellis Island was the second project created under the Tarnsey Act, which authorized architectural competitions for the design of federal buildings. The competition was won by the New York firm of Boring & Tilton.⁸ The firm's plan featured a linear, southwest-northeast axis with three primary "fireproof" buildings—a French Renaissance style immigration building roughly on the site of the burned structure, a kitchen and laundry building and a powerhouse. Additionally, the plan proposed a new man-made island south of the original island that would contain a new Georgian Revival style hospital complex sited on the same linear, southwest-northeast axis as the facilities on Island 1. A ferry slip would separate the two islands. The plan also called for an ornamental Beaux Arts setting with "...symmetrical walks lined with allees of trees."⁹

The Immigration Building on Island 1 opened December 17, 1900, processing 2,251 people the first day.¹⁰ Between 1897 and 1903 several other buildings were erected on Island 1, and the Hospital, the Hospital Outbuilding and the Surgeon's House were built on Island 2. When the Hospital was finished it was staffed by the uniformed officer physicians of the U.S.

⁴ Tracy J. Stakely, *Cultural Landscape Report for Ellis Island—Statue of Liberty National Monument—Site History, Existing Conditions, Analysis* (Brookline, MA: National Park Service, Olmstead Center for Landscape Preservation, 2003), 27.

⁵ Stakely, 29.

⁶ Harlan D. Unrau, *Historic Resource Study (Historical Component) Volume I of III: Ellis Island Statue of Liberty National Monument, New York-New Jersey* (U.S. Department of the Interior, National Park Service, 1984), xix.

⁷ From 1890 until Ellis Island opened in 1892, immigrants arriving at New York were processed through Castle Garden and then through a building called the Barge Office. According to Harlan D. Unrau in *Historic Resource Study (Historical Component) Volume II of III, Ellis Island-Statue of Liberty National Monument New York-New Jersey*. (U.S. Department of the Interior, National Park Service, Denver Service Center, 1981), 215-216; from 1897-1900, an annex to the Barge Office was turned into an inspection station for steerage passengers and two large houses on State Street fronting the Battery were leased for detention and hospital uses.

⁸ Antoinette J. Lee, *Architects to the Nation: The Rise and Decline of the Supervising Architect's Office* (New York and Oxford: Oxford University Press, 2000), 201-202.

⁹ Stakely, 38.

¹⁰ Stakely, 40-41.

Marine Hospital Service, an agency established in 1798 to provide medical care to disabled or injured merchant seamen and naval and marine personnel.¹¹

Although the new hospital provided a much needed service, it was too small to adequately serve the treatment needs of a growing immigrant influx, and provided no facilities for patients with communicable diseases such as measles, whooping cough, diphtheria, scarlet fever and non-acute forms of pulmonary tuberculosis.¹² In June 1902, Dr. George Stoner, the supervising physician at Ellis Island, began lobbying for additional hospital space and the construction of a contagious disease facility. In September, the urgency increased with the New York City Health Department's decision to terminate, at an unspecified date, its contract with Ellis Island for the treatment of immigrants with contagious diseases. William Williams, Commissioner of Immigration at Ellis Island, assisted his medical staff in their lobbying efforts by citing for Congress and senior immigration officials the numbers of seriously ill immigrants treated at Ellis Island. According to Williams as many as 400 to 500 people were seriously ill at any time on the island. Other sources stated that in one year more than 1,500 children had arrived with the measles or scarlet fever.¹³

In 1903, to facilitate the development of Island 3 and its hospital complex, the federal government began negotiations with New Jersey to acquire submerged land around Ellis Island, and Congress appropriated \$150,500 for the island's construction. However, due to legal uncertainties of title and right to build, Congress withheld funding until the issues were settled.¹⁴ On November 30, 1904 the federal government received clear title to both Ellis Island (its ownership had also been questioned by New Jersey in the suit) and the submerged land around it, clearing the way for the construction of Island 3 and the contagious disease hospital.

Located about 500 feet from Island 2, Island 3 was built of log cribbing filled with clean soil to specifications developed by Alfred Brooks Fry, Chief Engineer and Superintendent of Repair of U.S. Public Buildings at New York.¹⁵ The island was originally to have been located about 800 feet from Island 2, but in consideration of issues that could arise with New Jersey over the island's placement, Commissioner Williams consulted with the U.S. Surgeon General to determine the appropriate distance for a contagious disease hospital. He was advised that according to contemporary medical understanding of contagion, a maximum of 410 feet with 200 feet of clear water was ample to protect the adjacent facilities from the spread of disease. In

¹¹ Fitzhugh Mullan, *Plagues and Politics: The Story of the U.S. Public Health Service* (New York: Basic Books, 1989), 14.

¹² Department of Commerce and Labor, *Report of the Commission Appointed by the President on September 16, 1903 to Investigate the Condition of the Immigration Station at Ellis Island*, (Washington, D.C.: U.S. Government Printing Office, 1904), 15. Immigrants with non-communicable diseases were treated at New York City area hospitals.

¹³ Stakely, 48-49.

¹⁴ Letter, F. P. Sargent to Commissioner of Immigration, Ellis Island, (24 September 1903), Folder - Estimates on Construction Hospital Island 1907, Pt. 1A, Box 36, Entry 9, RG 85, NARA I.

¹⁵ Folder 51447/044, Part 3 – Construction, New Island, 1909, Box 36, Entry 9, RG 85, NARA I.

addition, the Surgeon General advised that several small pavilions where diseases could be treated in isolation were preferable to a single building.¹⁶

Construction began on the 800 feet long by 250 wide island in April 1905. Digging a trench fifteen feet deep by thirty feet wide, the New Jersey Dock and Bridge Building Company filled it with "...more than 1.2 million cubic feet of cribwork and stones. The island was formed by filling behind the cribwork with approximately sixty thousand cubic yards of dredged material including 'cellar dirt, stones, clay, old masonry, etc.' and seventy thousand cubic yards of earth and a 'very excellent grade of sand obtained by dredging' near the island."¹⁷ Finished in early 1906, the resulting island was 4¾ acres and increased the total mass of Ellis Island to 21¼ acres. It was connected to Island 2 by a wood gangway.

The contagious disease hospital was designed by the Treasury Department's Office of the Supervising Architect under the leadership of James Knox Taylor.¹⁸ The Office of the Supervising Architect was responsible for the design, oversight and construction of all types of federal buildings including custom houses, courthouses, and post offices.¹⁹ According to architectural historian Antoinette J. Lee, for decades this cohort of federal architects played an important role in molding a national building program through federal buildings "that serve[d] as the political and architectural anchors of thousands of communities nationwide."²⁰

Supervising Architect James Knox Taylor (1857-1929) was born in Knoxville, Illinois and attended schools in St. Paul, Minnesota. He completed two years of architectural training at the Massachusetts Institute of Technology. Thereafter he worked for architectural firms in New York City and Boston but by 1882 had opened his own office in St. Paul. In 1884 he went into partnership with Cass Gilbert. Taylor's experience in running an architectural office and his administrative skills were assets and the firm of Gilbert & Taylor was successful, designing residences for prominent St. Paul clients. The partnership dissolved in 1892, and Taylor and his family moved to Philadelphia where he formed another partnership. The Panic of '93 adversely affected the architectural profession and by 1895, Taylor had joined the staff of the Office of the Supervising Architect as a draftsman. In 1896 he was promoted to temporary principal draftsman, and when the position of Supervising Architect became available in 1897 he was selected, serving until 1912.²¹ During his tenure as Supervising Architect, Taylor oversaw the design and construction of post offices, federal buildings and custom houses. After retiring as Supervising Architect, he returned to private practice in Boston. He later moved his practice to Yonkers, New York and then retired to Tampa, Florida.²²

¹⁶Letter, U.S. Surgeon General to William Williams, (6 November 1902), Folder 51447/044, Pt 1, Box 36, Entry 9, RG 85, NARA I.

¹⁷ Stakely, 51.

¹⁸ Memo, L.O.M., Assistant Secretary to unidentified person (n.d.). Folder 51436/1-8B [1] New Contagious Disease Hospital at Ellis Island, Pt. 1, Box 34, Entry 9, RG 85, NARA I.

¹⁹ Lee, 3.

²⁰ Ibid., 3-4.

²¹ Lee, 197-199, 215.

²² Henry F. Withey and Elsie R. Withey, *Biographical Dictionary of American Architects (Deceased)* (Los Angeles: Hennessy & Ingalls, Inc., 1970), 592.

The contagious disease hospital's design employed the same linear, southwest-northeast axis as the buildings on Islands 1 and 2. It also featured a Georgian Revival decorative mode similar to the original hospital, but here rendered in a simplified form more appropriate to the lower scale of this new complex. The plan was the then common hospital pavilion form which featured individual structures for treatment wards, administrative spaces, and support functions, all integrated by connecting circulation corridors. This plan type originated in France during the late 18th century and became a standard hospital type in the late 19th and early 20th centuries. The pavilion plan first came to the forefront of hospital design during the wide acceptance of a miasma theory of disease that saw stagnant and unhealthy air as the cause of infection. Even as modern germ theory gained widespread currency, the pavilion plan of large open wards housed in individual but interconnected buildings remained popular. Open ward design maximized fresh air and natural light to aid patient recovery. This approach also allowed for efficient use of the nursing staff with a few caretakers able to view a room lined with patient beds. Those suffering from the same illness could be grouped together and other patients in the complex protected from cross infection.²³

Congress appropriated \$250,000 in 1905 for the new structure, but that was insufficient to complete all the needed facilities. Opinions among immigration and medical officials and government architects, as well as congressmen, differed in regard to needed facilities and funding, but a primary goal was to build a complex capable of meeting medical needs for the foreseeable future and in so doing avoid the need for additions or extensions as had been required with the hospital complex on Island 2.²⁴ Discussions among immigration officials in 1906 expressed concern that to build piecemeal could jeopardize the facility's function. To stay within the approved budget of \$500,000, officials recommended eliminating luxuries, but not space or other necessities.²⁵ But despite these factors, funding was supplied in three increments and ultimately increased to cover construction of all needed buildings.

Buildings constructed during the first phase in 1907 were the Administration Building, the Kitchen, Power House and Laundry and measles wards A, B and E.²⁶ These structures were built under a December 1906 contract awarded to the North-Eastern Construction Co. and completed in November 1907.²⁷ The erection of measles wards C, D and G, isolation ward L, the Staff House, Mortuary and some corridors followed immediately after in the second phase.

The one-story Mortuary was constructed by North-Eastern Construction Co. in the second building phase at a cost of \$2,387 under a contract signed October 14, 1907.²⁸ Also

²³ Annmarie Adams, *Medicine by Design: The Architect and the Modern Hospital 1893-1943* (Minneapolis, MN: University of Minnesota Press, 2008), 9-10.

²⁴ Stakely, 64.

²⁵ Memo, F. H. Larned to Bureau of Immigration and Naturalization, (15 December 1906), Folder 51436/1-8A, Box 33, Entry 9, RG 85, NARA I.

²⁶ Although eight wards were called measles wards, they were intended and were used for treatment of acute contagious diseases including measles, whooping cough, diphtheria and scarlet fever, among other illnesses.

²⁷ Letter, A.B. Fry to North-Eastern Construction Co., Folder 51436/1-8D, Box 34, Entry 9, RG 85, NARA I.

²⁸ Folder 51436/1-8D: Contagious Disease Hospital at Ellis Island, Contract, Box 34, Entry 9, RG 85, NARA I; and Unrau, 1981, 528-530.

included in this contract was construction for Wards C, D, L, the staff house, the two-story corridor from the power house to Ward E, Ward F and Ward B to the south of ward H, and the pipe tunnel and trench that ran under the corridor.²⁹ The contract included a budget and scope for only about half of the work program, and the government agreed to provide North-Eastern Construction Co. authorization for the remaining work within 12 months at the bid prices. Photographs dated late 1907 and early 1908 show the Mortuary under construction. (Figures 4-6)

Subsequent contracts in 1908, also with North-Eastern Construction Co., saw to erection of measles wards F and H, isolation wards I and K, and the Office Building. By the spring of 1909, the contagious disease hospital was completed and contained seventeen interconnected buildings including eight measles wards, three isolation wards, the Office Building, Kitchen, Mortuary, Administration Building, Power House, and connecting corridors. However, the complex lacked equipment and furnishings, as well as a tie to electricity on Island 1 and these matters delayed its opening until 1911.³⁰

The Mortuary is a small, one-room space intended for cadaver storage. It is the only freestanding structure in the contagious disease hospital, standing a few yards away from the neighboring Office Building and corridor. The Mortuary is still closely linked to the rest of the hospital by an open platform between its entrance and the corridor. The Office Building originally had a similar open platform connection that was enclosed by 1914. This minor separation seems appropriate given the function of this modest support structure. The construction of the new contagious disease hospital between 1907 and 1909 falls within the peak years of immigration at Ellis Island - 1900 through 1914. The number of immigrants needing medical care rose in conjunction with the increase in immigration overall. More than one million people passed through the facility in 1907, and on April 17, 1907, 11,747 immigrants arrived at Ellis Island, the largest number in a single day.³¹ The previous year 563 people were ill at Ellis Island and 1,990 immigrants had to be admitted to New York City hospitals for care due to lack of facilities.³² At the new hospital physicians with the U. S. Marine Hospital Service were now better equipped to deal with their steady influx of new patients.

The Georgian Revival styling used for the contagious disease hospital featured pebble and dash (stucco) wall surfaces detailed with red brick quoins and red brick keystones and springers. Limestone was used for window sills on all buildings and for modestly scaled, but well appointed, porticos on a few buildings, including the office building. The use of red brick and limestone for detailing played off the red brick walls and limestone features of the Island 2

²⁹ Contract, (14 October 1907), Folder 51436/1-8D, Box 34, Entry 9, RG 85, NARA I.

³⁰ Stakely, 65. It is interesting to note that contracts for the contagious disease hospital buildings, like many other government funded buildings of the time, did not include specifications for plumbing, electricity, heating or equipment and furnishings. These items were handled under separate contracts. In some cases this approach caused delays in completing buildings because installation of plumbing, electrical and heating systems is integral to efficient building construction. This situation may have been a relic of earlier periods when indoor plumbing was rare, heating was provided by fire places and stoves, and electricity unavailable.

³¹ Unrau, *Volume I*, 1984, xix.

³² Letter, Robert Watchorn, Commissioner of Immigration at Ellis Island to F. P. Sargent, Commissioner General of Immigration, (n.d.). NARA, Washington, D.C., Record Group 85, Records of the Immigration and Naturalization Service, Subject and Policy Files, 51436/001-51439/023, Box 34, Folder 51436/1-8B, FF New Contagious Hospital at Ellis Island, Part 1.

hospital complex, providing a visual connection to those larger buildings. Although the Mortuary was a vital component of the complex, its small size and support function was appropriately referenced in its detailing. Ward G, and the other wards in the contagious disease hospital also utilized the same materials and detailing, but these buildings were larger in scale and formed the majority of the complex's buildings. Separating each ward were two-story, pebble and dash, open-sided corridors designed as hyphens that connected the ward buildings and the Kitchen and Administration Building into an integrated whole. These and the one-story corridor sections adjacent to the Mortuary and the Power House were built during the 1907-1909 period..

A few additional improvements to the new Island 3 hospital were undertaken shortly after it finally opened. In 1911, fill was added around the first set of buildings erected, and a lawn planted. In 1912, additional landscaping was added to Island 3 in the form of a lawn on the north side of the island; the south exposure was not landscaped and remains so today.³³ Although concrete walks were planned for Island 3, they were not installed, and in 1913 cinder walks were substituted. Congress appropriated funds in 1914 to install windows in the open corridors that linked Island 3 buildings and the work was completed that same year.³⁴

In 1914 the start of World War I in Europe significantly slowed immigration, and after the United States entered the war in 1917, immigration slowed even more. The number of people arriving at Ellis Island in 1915 was 178,416, but by 1918 only 28,867 immigrants passed through the facility's doors.³⁵ During wartime Ellis Island was mainly used as a military hospital and detention and deportation facility for enemy aliens, including German merchant seamen taken from ships in New York and Boston harbors when the United States entered the war.³⁶ In 1918-1919, while the U.S. Army occupied the hospital complex as a facility for wounded military personnel, the Army replaced the wood gangway between Island 2 and Island 3 with a covered wood walkway.³⁷ They also extended it along the western perimeter of Island 3.³⁸ During this period, immigrants needing care were placed in New York City area hospitals.³⁹ The majority of wounded military returning from Europe were processed through Ellis Island and it was the first

³³ Stakely, 65.

³⁴ In 1911 and 1916, explosions on nearby New Jersey wharves damaged buildings at Ellis Island. The 1916 event at Black Tom Wharf caused extensive damage to buildings on Island 2 and Island 3, as well as those on Island 1. Windows were blown out of nearly every building, and roofs, ceilings and even walls were damaged. About forty people were injured by flying glass, all but one were facility employees. Repairs were made and completed by June 1917 at a cost of \$400,000. Unidentified newspaper article, (2 February 1916)[sic], William Williams Papers, Archives and Manuscripts Section, New York Public Library, microfilm, Reel 2; Harlan D. Unrau, *Historic Resource Study (Historical Component) Volume III of III: Ellis Island Statue of Liberty National Monument, New York-New Jersey* (U.S. Department of the Interior, National Park Service, 1984), 772.

³⁵ Unrau, *Volume I*, 1984, 7.

³⁶ *Ibid.*, xx.

³⁷ Stakely, 65.

³⁸ Beyer Blinder Belle/Anderson Notter Finegold, *Ellis Island Statue of Liberty National Monument: Historic Structures Report Units 2, 3 and 4*, Volume 4, Part 3 (U.S. Department of the Interior, National Park Service, 1988), 437.

³⁹ Unrau, *Volume III*, 1984, 795.

World War I “debarkation hospital” established in the United States.⁴⁰ In 1919, the hospitals at Ellis Island were returned to the U.S. Public Health Service.⁴¹

In the early 1920s immigration slowed as a result of new federal immigration legislation in 1921 and 1924. This legislation limited annual immigration and established quotas based on a percentage of each group resident in the United States in 1910; these percentages were later revised to reflect group figures for 1890.⁴² Because of rising literacy in Europe, the requirement that immigrants be literate in some language, instituted in 1917, rapidly became ineffective as a means to curb immigration. The new quota system proved more effective.⁴³ The legislation of the early 1920s also stipulated that immigrants obtain a visa in their home country through examination at American consulates so that those found to have contagious diseases, physical handicaps, mental illness or “feeble-mindedness” could be barred from departure and spared the expense of travel only to be turned away at Ellis Island. This process resulted in far fewer people arriving at Ellis Island, and transport to the facility was needed only for those requiring medical assistance or who were being detained for some other reason.⁴⁴ Ellis Island was “...rapidly losing the basic function for which it had been created—the primary examination and processing of immigrants.”⁴⁵ Most immigrants were “pre-processed” before leaving home with final checks conducted on board the ships.

Beginning in 1926 physicians at Ellis Island began intensive examination of alien merchantmen taken from both American and foreign vessels. Within the first month, 48,031 sailors were intensively examined and 209 sent to Ellis Island for testing and diagnosis. Federal legislation required that those with communicable diseases be confined to a hospital for the duration of their ship’s stay in port, which led to hospital overcrowding, despite the limited number of immigrants. The U.S. Marine Hospital on Hoffman Island was the designated merchant marine hospital for New York, but Ellis Island handled the overflow, resulting in a greater number of seamen patients than immigrants.⁴⁶ By 1928, the Mortuary had been renamed the “Animal House.”⁴⁷ It was now used to house small laboratory animals used for medical

⁴⁰ Ibid., 796.

⁴¹ The U.S. Marine Hospital Service provided care for merchant seamen and other related occupations in hospitals around the country. The U.S. Public Health Service also operated hospitals, including care facilities on Indian reservations, and provided other public health services.

⁴² Unrau, *Volume I*, 1984, xx.

⁴³ Thomas M. Pitkin, *Keepers of the Gate: A History of Ellis Island* (New York: New York University Press, 1975), 38.

⁴⁴ Of course not all such cases were identified and need for examinations and medical assistance at Ellis Island continued.

⁴⁵ Unrau, *Volume III*, 1984, 896.

⁴⁶ Ibid., 920. The quarantine hospital on nearby Hoffman Island served New York area quarantine cases until the completion in 1938 of a new facility at Stapleton on Staten Island. Hoffman Island is a tiny land mass due southeast of Staten Island.

⁴⁷ A May 1928 site plan of Island 3 shows the Mortuary renamed as the Animal House. See NPS Drawing No. 462/43,920, Sheet 2 of 2, (21 May 1928). “Hospital Buildings, Island No. 3.”

testing. It is not known where the morgue was relocated, but it is possible that the morgue in the Hospital Outbuilding on Island 2 was utilized.

By this time many of the oldest buildings at Ellis Island needed repair due to years of heavy usage. Various repairs and upgrades were made to buildings throughout the island.⁴⁸ Window screens were installed on all buildings on all islands in 1928 and again in 1938 under a contract let to the Zero Weather Stripping Co. of New York City.⁴⁹ Modifications to window sashes were made to accommodate the screen installation.⁵⁰ In addition, changing ideas about the need for exercise and recreation by both immigrants and staff members spurred interest in constructing more recreational facilities. In 1923, the Bureau of Immigration requested more than \$2.5 million for a new seawall, recreational facilities, and infill of the water between Island 2 and Island 3. This amount was not approved. The next year President Calvin Coolidge requested \$300,000 from Congress for this work, but the request was only partially funded. With the new funding, infill of the space between Island 2 and Island 3 began, although it was not finished until the 1930s.

With the smaller number of immigrants treated at the hospitals on Ellis Island, those facilities had room for non-immigrant patients. During this period, the contagious disease facility continued to treat tuberculosis patients and by 1930, such patients from New York City's general population also were being cared for at Ellis Island. By 1930, 254 tuberculosis patients had been sent to Ellis Island. Although there were many empty beds at the start of this program, additional space was soon needed. To accommodate the new patients, second floor corridors were used for ward care, adding an additional 40 beds to the facility.⁵¹ These beds were likely adjacent to the three isolation wards at the southeast end of Island 3.

After the stock market crash in October 1929, economic opportunities in the United States were limited, and President Herbert C. Hoover instructed American consuls to strictly apply rules preventing the immigration of people likely to become public charges. In 1931, perhaps as a counter action to the xenophobia displayed by some American authorities, the press and a portion of the public, Edward Corsi became Ellis Island's new Commissioner of Immigration, remaining in that post until 1934. Corsi was himself an immigrant who had come through Ellis Island in 1907. His professional life involved extensive social service work among New York City immigrants and a major emphasis of his time as commissioner at Ellis Island was to humanize the immigrant experience and make the facility an "inspiration" to both Americans and to immigrants.⁵²

⁴⁸ Stakely, 77.

⁴⁹ Beyer Blinder Belle/Anderson Notter Finegold, *Volume 4, Part 2*, 228.

⁵⁰ Letter, Albert & Harrison to District Commissioner of Immigration and Naturalization at Ellis Island (27 July 1937). NARA, Northeast Region, New York City. Record Group 79, Records of the National Park Service, Box 25, ff 421 Miscellaneous Correspondence and Notes, 1933-1954.

⁵¹ Harlan D. Unrau, *Ellis Island Statue of Liberty Historic Structure Report (Historical Data)* U.S. Department of the Interior, National Park Service, 1981, 290, as referenced from the Surgeon General's Annual Report, 1930.

⁵² Stakely, 79.

The election of Franklin Delano Roosevelt and implementation of his many New Deal initiatives offered opportunities to improve the physical plant and therefore the immigrant experience at Ellis Island. The Department of Labor was responsible for immigration at this time. Secretary of Labor Frances Perkins appointed a non-partisan committee of 52 citizens to study the issues and opportunities at Ellis Island. Corsi worked closely with the committee, which issued a report in 1934 recommending a number of changes for improving the immigrant facilities and processing procedures at Ellis Island. As a result of the committee's recommendations, between 1934 and 1936 three major new buildings were erected at Ellis Island. These were the 1934 New Immigration Building, the 1934 Ferry Building and the 1936 Recreation Building. All were funded by New Deal-era Public Works Administration (PWA) monies authorized under the National Recovery Act. These buildings were designed to separate immigrants from the numerous types of deportees held at Ellis Island. Other improvements to Ellis Island during this period included landscaping projects and the construction of new brick corridors on Island 2 and Island 3, financed by the Works Progress Administration (WPA). During this period the original Island 3 Mortuary seems to have continued in its function as the animal house while a portion of the engine room in the Power House on Island 3 was converted to morgue space.⁵³

During World War II the hospitals on Island 2 and Island 3 housed wounded servicemen.⁵⁴ Following the war, Ellis Island again processed and treated sick or injured immigrants as well as detainees and deportees. On March 1, 1951, the U.S. Public Health Service closed the hospitals on Island 2 and Island 3 due to the declining number of patients, and the increasing obsolescence of the facility. They maintained a small infirmary for detainees in the main immigration building.⁵⁵ On November 12, 1954, Ellis Island closed, and both immigration and Coast Guard operations ceased. Equipment and fixtures, including plumbing, were removed from many buildings and distributed to other federal entities including border patrol offices, federal prisons, the Public Health Service, the military and the General Services Administration.⁵⁶ From 1954 until 1965, Ellis Island was under the control of the General Services Administration, which sought to sell or lease Ellis Island.⁵⁷ After several unworkable proposals, the island was placed under the jurisdiction of the National Park Service and on May 11, 1965, President

⁵³ Plans and Drawings, (24 April 1936). "Mortuary and Autopsy Room." NPS Drawing No. 462- 41,999z1 50; Beyer Blinder Belle/Anderson Notter Finegold, *Volume 4, Pt. 2*, 235. This report suggests that the boiler room in the Power House and Laundry on Island 3 may have been used as a morgue until the engine room was converted for morgue use in 1936. However, if the boiler room was still in use, it would have been too warm to safely store human remains. According to the Beyer Blinder Belle/Anderson Notter Finegold Volume 4, Part 2 report, pp262-263, mortuary bins were noted on a sketch made by Albin Maskelony who worked at Ellis Island between 1934 and 1937. Maskelony's sketch showed the "bins" in the northeast section of the boiler room. They may have been an improvised mortuary that functioned until the engine room in the Power House and Laundry was modified as a morgue in 1936.

⁵⁴ Beyer Blinder Belle/Anderson Notter Finegold, *Volume 4, Part 3*, (n.p.) floor plan showing historical room use. NPS Drawing No. 356/26,011/6 of 24.

⁵⁵ Stakely, 92.

⁵⁶ Unrau, *Volume III*, 1984, 1002.

⁵⁷ U.S. Senate, 89th Congress, 1st Session *Report No. 306. Disposal of Ellis Island* (Washington, D.C., Government Printing Office, 1965).

Lyndon B. Johnson issued Proclamation 3656 adding the island to the Statue of Liberty National Monument.⁵⁸

II. ARCHITECTURAL INFORMATION

A. General Statement:

1. Architectural character:

The Mortuary is a small, rectangular, one-story building featuring symmetrical massing, a pyramidal roof, and load bearing brick walls covered with pebble and dash (small aggregate) stucco set on a dressed granite block base. Its Georgian Revival detailing and form are consistent with the rest of the Contagious Disease Hospital structures. Corner brick quoins and a red, composition shingle roof finish the building. Windows pierce three sides of the building with the fourth side containing the entry door. The entry is centrally placed in the south elevation and opens onto a small stoop that accesses an adjacent covered corridor linking the Mortuary with other hospital complex buildings. The building's original cadaver storage units were removed at an unknown time, but the building's exterior is largely unchanged. The interior retains much of its original materials and finishes including wall and ceiling plaster, decorative metal ceiling vent, entry door, wood frame hopper window units and glazing, ceramic wall sconces and concrete flooring. A large, porcelain wall hung utility sink and metal faucets remain from the historic period.

2. Condition of fabric:

Fair. Deterioration of interior plaster and wood finishes as well as wiring and plumbing systems has occurred. Currently windows in the building are boarded up to prevent further damage. The building is vacant.

B. Description of Exterior:

1. Overall dimensions: 15'-1" x 21'-1"

2. Foundations: The building is raised about four feet above grade on a dressed limestone block base and brick water table. A decorative cast iron crawlspace door is on the north elevation. The crawlspace was not accessed.

3. Walls: Exterior walls are pebble and dash (small aggregate) stucco applied over load bearing brick walls and detailed with brick quoins. A projecting brick soldier course water table sits above the dressed granite block base. A flat brick cornice encircles the building just below the roof junction.

4. Structural system: The foundation support is comprised of twelve inch concrete pilings.⁵⁹ Walls are load bearing brick and hollow clay tile. The interior roof structure was not visible but is thought to utilize the system of wood beams and rafters indicated on the 1906 drawing.

5. Stoops: A small, rectangular raised concrete stoop on the south elevation of the building is edged with red brick; the east and west faces are finished with brick. The stoop links the building with the adjacent covered corridor. According to the 1906 plans the stoop contains a tunnel for plumbing and other infrastructure elements.

⁵⁸ Unrau, *Volume I*, 1984, 11.

⁵⁹ Plans and Drawings, (1 August 1906). "Mortuary." NPS Drawing No. 462 43902F/9.

6. Chimneys: None

7. Openings:

- a. Doorways and doors: The south elevation is pierced with a centrally placed door opening containing an original five panel arched wood door set in a wood reveal and featuring a wood surround. A segmental pebble and dash arch detailed with a brick keystone and brick springers is above the doorway. The threshold is concrete.
- b. Windows: The building has three windows, one each on the north, east and west elevations. These are centrally placed within each façade. The windows are one over one, wood frame, arched, hopper types set in wood surrounds with wood trim and pebble and dash reveals; the 1906 plans show the windows as having side sash pivots. The windows now operate with hinges. Exterior lug sills are limestone. Above each window is a segmental pebble and dash arch with a brick keystone and brick springers. Original, or historic, window glass is extant; one pane is cracked. Windows are temporarily enclosed with plywood pierced with small plexiglass fixed pane windows. Window screens were installed on all buildings on all islands in 1928 and again in 1938 under a contract let to the Zero Weather Stripping Co. of New York City.⁶⁰ Modifications to window sashes were made to accommodate the screen installation.⁶¹

8. Roof:

- a. Shape, covering: Pyramidal; covered with red, composition, three-tab shingling, installed as a temporary cover pending reinstallation of original red clay tile roofing, which is in storage until building restoration is completed. Temporary PVC gutters and downspouts channel water from the roof. A large copper ventilator is mounted atop the roof apex.
- b. Cornice, eaves: Open, wood eaves, detailed with attached, non-structural, carved rafter ends. Eave trim is masked by round bottom copper gutters.
- c. Dormers: None

C. Description of Interior:

1. Floor plans: See measured drawings HABS No. NY-6086-N for complete existing conditions plans of this building. The one-story building has a single room. Spatial arrangement is oriented to the south elevation entry. Opposite the doorway on the north wall is a wall mounted porcelain sink; a centrally placed window is above the sink. Flanking walls also have centrally placed arched wood frame windows. The crawlspace is not accessible from the interior of the building, nor is the attic area.

2. Stairways: None

⁶⁰ Beyer Blinder Belle/Anderson Notter Finegold, *Volume 4, Part 2*, 228.

⁶¹ Letter, Albert & Harrison to District Commissioner of Immigration and Naturalization at Ellis Island (27 July 1937). NARA, Northeast Region, New York City. Record Group 79, Records of the National Park Service, Box 25, ff 421 Miscellaneous Correspondence and Notes, 1933-1954.

3. Flooring: Concrete slab

4. Wall and ceiling finish: Plaster walls and ceilings are present. Concrete baseboards are approximately four inches high and encircle the room; they are flush with the plaster walls. The 1906 plans show slate slab shelves mounted on wrought iron brackets fastened to the walls with expansion bolts along the full length of the east and west interior walls. These shelves are no longer extant.

5. Openings:

a. Doorways and doors: The sole door in this building is a five panel wood type. The door is set within a painted beaded wood surround and has a plain, painted wood reveal.

b. Windows: Hopper windows with clear glazing are recessed into the interior walls and detailed with painted beaded wood surrounds and plain, painted wood reveals. Sills are plain painted wood.

6. Decorative features and trim: None

7. Hardware: Historic brass or bronze hinges and latches survive on all building windows. The window hardware probably dates to the modification of the sashes in 1938. Original brass or bronze door hardware includes loose pin hinges, strike plates, push button locks, oval knobs and plates, and an interior key lock. A cast iron deadbolt is mounted above the door knob assembly and retains its door-frame-mounted cast iron receptacle.

8. Mechanical equipment:

a. Heating, ventilation: An iron radiator located east of the wall-mounted sink is attached to the concrete floor. The radiator probably dates to the building's conversion to an animal house as its original mortuary use would not have required heating, and indeed such would have been a detriment to sanitary storage of human remains. Ventilation was provided by an extant roof mounted ventilator connected to a decorative iron vent grille located in the center of the ceiling. Windows and doors also provided ventilation.

b. Lighting: A ceiling mounted electric light set in a metal shade is located near the center of the room's ceiling. A metal light switch is located on the south building wall; it likely operated the ceiling fixture. A ceramic wall sconce is on the north wall east of the sink. Electrical upgrades made to all Island 3 buildings in 1932 also may have been implemented in the Mortuary.⁶²

c. Plumbing: The existing wall-mounted porcelain sink may date to the building's conversion to use as an animal house, but could be the original enameled iron unit specified for the building.⁶³ The sink is serviced by galvanized metal and cast iron pipes. Other galvanized pipes are on the west interior wall, and galvanized/cast iron pipes and fittings service the radiator.

⁶² Specifications and Contracts, 1898-1955, FF 161. National Archives and Records Administration (NARA), Northeast Region, New York City. Record Group 79, Records of the National Park Service, Box 7.

⁶³ Specifications for construction, (17 September 1906), a20, NARA, Washington, D.C., Record Group 85, Records of the Immigration and Naturalization Service, Subject and Policy Files, 51436/001-51439/023, Box 34, Folder 51436/1-8C, Part 1.

d. Other: A metal fire detection box and wires of recent installation are on the south wall and ceiling of the building.

D. Site:

1. Historic Landscape Design: The Mortuary is a small auxiliary building tucked into the southwest corner of Island 3 between Measles Ward G to the east/northeast and the hospital Office Building to the northwest. The building faces south and its raised concrete stoop connects with a one-story corridor that is part of the Island 3 corridor system. A concrete at-grade walk is located on the east and south sides of the building. Historic photographs dating to the early 20th century show the adjacent buildings surrounded by open, grassy space. Mature sycamores and other trees now are found near adjacent buildings including Ward G and the Hospital Office Building, and throughout Island 3.

2. Corridors: A system of covered corridors connects all the buildings in the hospital complexes on Island 3 and Island 2. A one-story corridor segment is adjacent, but not connected to, the Mortuary on its south elevation and provides covered access to other hospital buildings.

III. SOURCES OF INFORMATION

A. Architectural drawings: A computerized Drawings Index System for all types of Ellis Island architectural and engineering drawings is located at the Technical Information Center (TIC), Denver Service Center, National Park Service, U.S. Department of Interior. Original drawings are digitized and available at <http://etic.nps.gov>. The drawings most useful in preparing this report were:

Office of the Supervising Architect, "Contagious Disease Hospital," (1906), NPS Drawing No. 462/43,901 Sheet 1 of 2

Office of the Supervising Architect, Mortuary Elevations and Sections (1906), NPS Drawing No. 462/43,902F Sheet 9 of 9

Office of the Supervising Architect, Mortuary/Plumbing Plan (23 September 1907), NPS Drawing No. 462/43,904 Sheet 1 of 1

Office of the Supervising Architect, "Plan of Proposed Grading and Sidewalks for the Contagious Disease Hospital Island," (23 June 1909), NPS Drawing No. 462/43, 909:1

B. Early Views: Construction photographs of the Mortuary are located in the collections of the Still Picture Branch, National Archives and Records Administration (NARA), College Park, MD. They are found in Record Group 121-BCP, Records of the Public Building Service, Prints: Photographs of the Construction of Federal Buildings, 1885-1954. Specific views are reproduced and identified below.

C. Bibliography:

See notes for a listing of relevant archival materials from Record Groups 79 and 85 at the National Archives and Records Administration in New York City (Northeast Region) and Washington, D.C.

1. Primary and unpublished sources:

Beyer Blinder Belle/Anderson Notter Finegold. *Ellis Island Statue of Liberty National Monument: Historic Structures Report Units 2, 3 and 4, Volume 4, Part 2.* U.S. Department of the Interior, National Park Service, 1986.

Beyer Blinder Belle/Anderson Notter Finegold. *Ellis Island Statue of Liberty National Monument: Historic Structures Report Units 2, 3 and 4, Volume 4, Part 3.* U.S. Department of the Interior, National Park Service, 1986.

Report of the Ellis Island Committee. New York: March 1934.

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Unrau, Harlan D. *Historic Resource Study (Historical Component), Ellis Island, Statue of Liberty National Monument, New York-New Jersey, Volumes I, II, and III.* U. S. Department of the Interior, National Park Service, 1984.

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William Williams Papers. Archives and Manuscripts Section, New York Public Library.

2. Secondary and published sources:

Adams, Annmarie. *Medicine by Design: The Architect and the Modern Hospital, 1893-1943.* Minneapolis, MN: University of Minnesota Press, 2008.

Lee, Antoinette J. *Architects to the Nation: The Rise and Decline of the Supervising Architect's Office.* New York and Oxford: Oxford University Press, 2000.

Mullan, Fitzhugh. *Plagues and Politics: The Story of the U.S. Public Health Service.* New York: Basic Books, 1989.

Pitkin, Thomas M. *Keepers of the Gate: A History of Ellis Island.* New York: New York University Press, 1975.

U.S. Department of Commerce and Labor. *Report of the Commission Appointed by the President on September 16, 1903 to Investigate the Condition of the Immigration Station at Ellis Island.* Washington, D.C.: U.S. Government Printing Office, 1904.

IV. PROJECT INFORMATION

Documentation of the Mortuary, and other selected structures on Ellis Island was undertaken by the Historic American Buildings Survey (HABS), within the Heritage Documentation Programs (HDP) of the National Park Service (Catherine C. Lavoie, Chief, HABS; Richard O'Connor, Chief, HDP) during the summer of 2009. The project was sponsored by Statue of Liberty National Monument, David Luchsinger, Superintendent. Field recording and measured drawings were completed by Paul Davidson, HABS Architect and Project Supervisor; and Architects Sara Dewey (University of Maryland), Luis

Pieraldi (Metropolitan University of Puerto Rico), Michael Sandbury (Kent State University), and Thomas Sheridan (Rhode Island School of Design). HAER Architect Dana Lockett and HABS Architect Robert Arzola served as Project Leaders. Diane E. Williams served as project historian with guidance from HABS Historian Lisa Pfueller Davidson. HAER Photographer Jet Lowe and HABS Photographer James Rosenthal completed large-format photographs during 2009. Assistance was provided by the staff of Statue of Liberty National Monument, particularly Diana Pardue (Chief, Museum Services Division), Richard Holmes (Archaeologist), and Don Fiorino (Historical Architect).

V. SUPPLEMENTAL INFORMATION - ILLUSTRATIONS

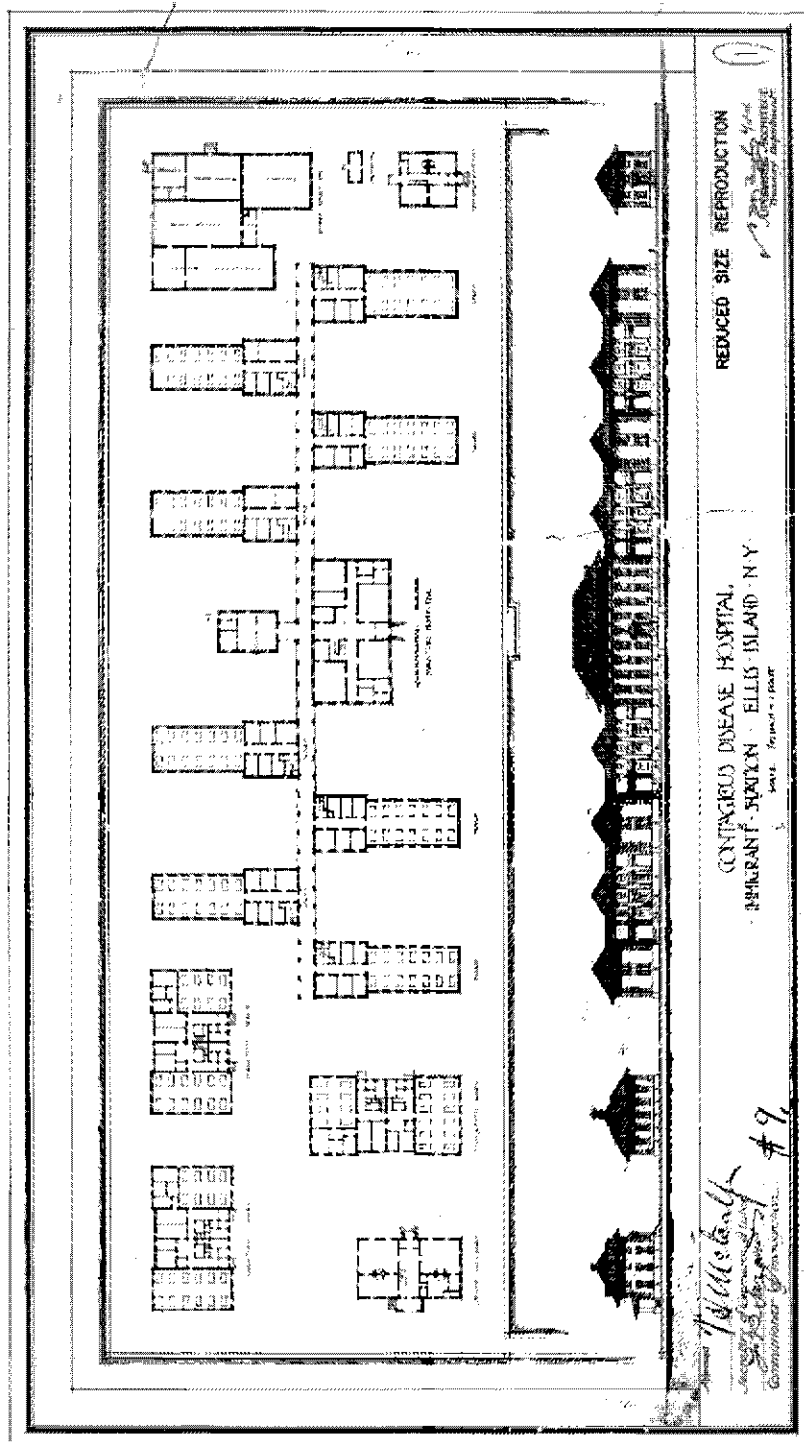


Figure 1: Office of the Supervising Architect, "Contagious Disease Hospital," 1906
(NPS Drawing No. 462/43,901 Sheet 1 of 2)
Source: Technical Information Center, Denver Service Center, National Park Service

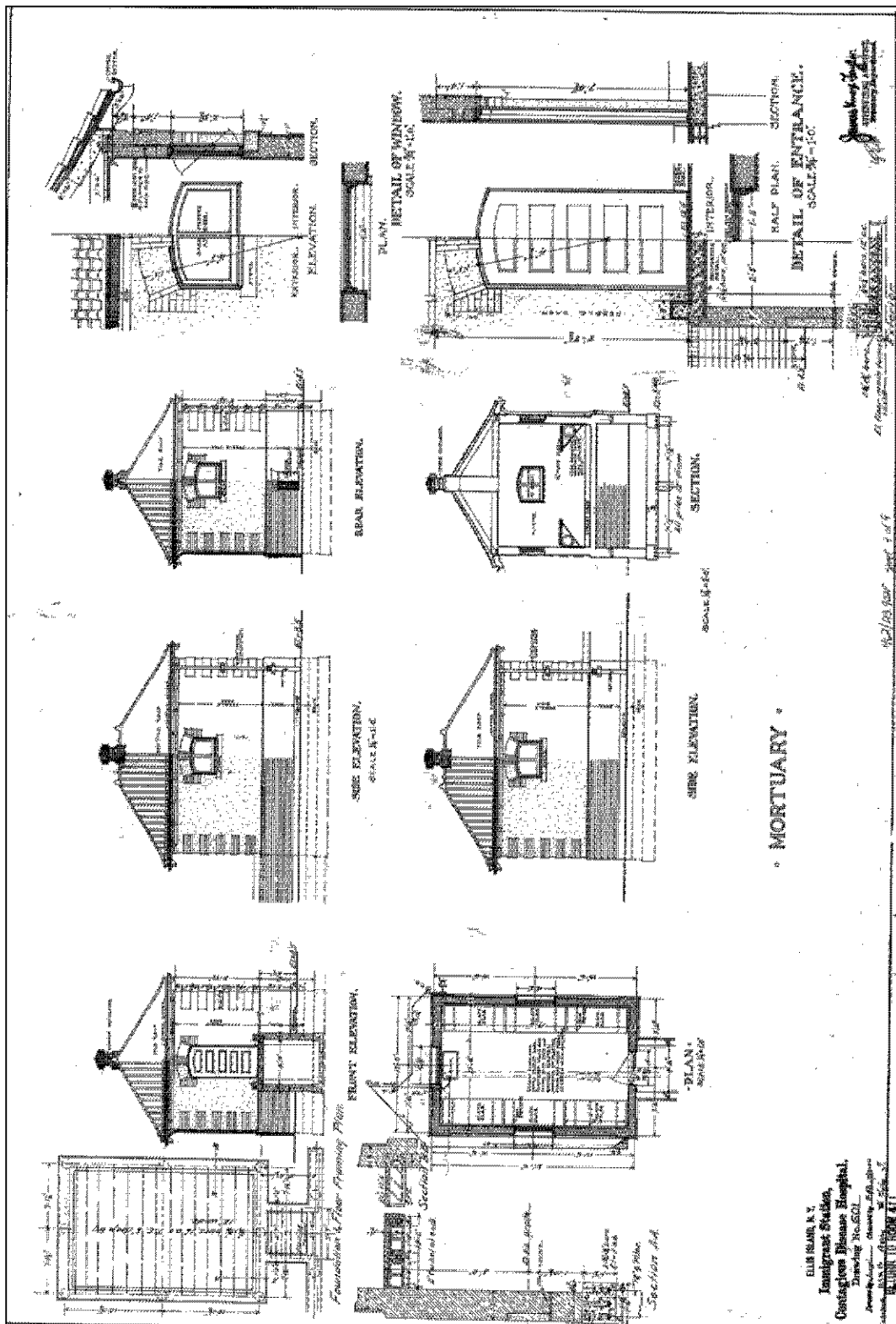


Figure 2: Office of the Supervising Architect, Mortuary Elevations and Sections, 1906
(NPS Drawing No. 462/43,902F Sheet 9 of 9)
Source: Technical Information Center, Denver Service Center, National Park Service

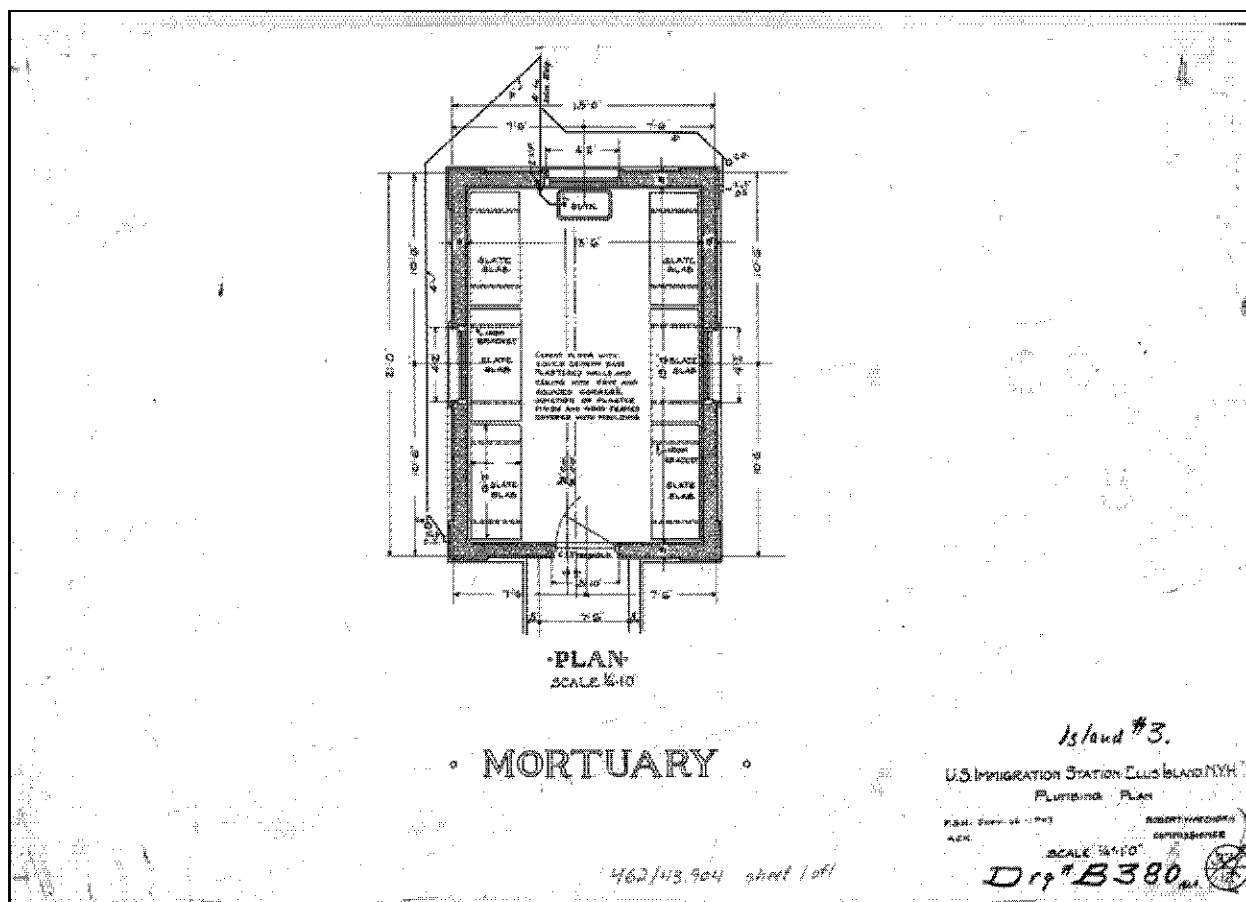


Figure 3: Office of the Supervising Architect, Mortuary/Plumbing Plan, 23 September 1907
(NPS Drawing No. 462/43,904 Sheet 1 of 1)
Source: Technical Information Center, Denver Service Center, National Park Service



Figure 4: Mortuary and Powerhouse looking Southwest (under construction), (14 October 1907)
(Photo No. 121-BCP-38A-21H)

Source: Record Group 121-BCP – Records of the Public Building Service, Photographs of the Construction of Federal Buildings, 1885-1954, Still Picture Branch, National Archives and Records Administration, College Park, Maryland



Figure 5: Mortuary, Measles Ward G, and Powerhouse, Looking South, (16 December 1907),
(Photo No. 121-BCP-38A1-22H)

Source: Record Group 121-BCP – Records of the Public Building Service,
Photographs of the Construction of Federal Buildings, 1885-1954,
Still Picture Branch, National Archives and Records Administration, College Park, Maryland

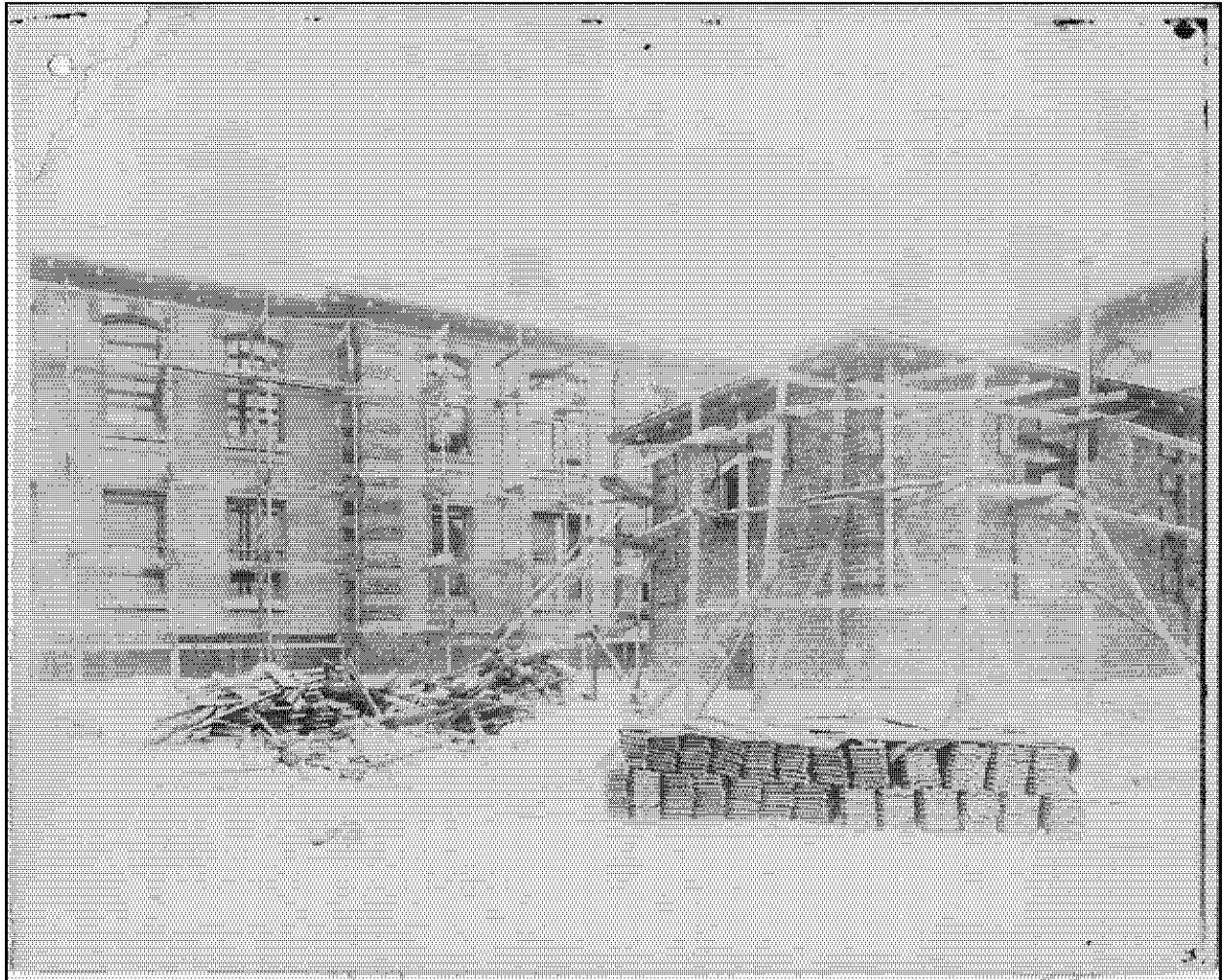


Figure 6: Measles Ward G and Mortuary, Looking Southeast, (11 February 1908),
(Photo No. 121-BCP-38A1-24F)

Source: Record Group 121-BCP – Records of the Public Building Service,
Photographs of the Construction of Federal Buildings, 1885-1954,
Still Picture Branch, National Archives and Records Administration, College Park, Maryland